


**CITY OF MILWAUKEE ELECTION COMMISSION  
VOTER REGISTRATION APPLICATION**

<b>VOTING QUALIFICATIONS</b>	<p><input type="radio"/> <b>By marking this circle, I certify that I am a qualified elector:</b>          I am a United States citizen          I will be at least 18 years old on the day of or before the next election          I am not currently serving a sentence, including probation, parole, or extended supervision, for a felony conviction          I will have lived at my address for at least 28 <u>consecutive</u> days before the next election with no present intent to move          I am not otherwise disqualified from voting</p> <p><b>If you do not meet <u>each</u> of these qualifications, you are <u>not</u> qualified to register. Do not complete this form.</b></p> <p><b>I am registering to vote because (select one):</b></p> <p><input type="radio"/> I was <b>previously registered</b> to vote in Wisconsin, but my <b>name and/or address</b> has changed.  <i>NOTE: If this is a change of address, your voting rights will be cancelled at your previous residence.</i></p> <p><input type="radio"/> I am a <b>new</b> Wisconsin voter.</p> <div style="border: 1px solid black; padding: 2px; width: 50px; float: left; margin-right: 10px;">  </div> <p><b>NEW WI VOTERS:</b> If you are submitting your completed form by MAIL, you must include a photocopy of a proof of residence document. Visit our web site or call for information on acceptable documents. If you do not provide this document, you will be asked for identification the first time you vote.</p>										
<b>IDENTIFICATION</b>	<p>If you possess a current and valid WI driver license (WDL), you <b>MUST</b> provide your WDL number below even if your address has changed. If your license is revoked, suspended or expired, you must provide your WDL number <b>AND</b> the last four digits of your SSN.</p> <p>If you <b>do not</b> possess a WDL, you must provide your WI ID card number. If you do not possess a WI ID card, you must provide the last four digits of your SSN.</p> <p>_____ - _____ - _____ - _____      Expiration Date: ____/____/____</p> <p><b>X X X - X X - _____</b></p> <p><input type="radio"/> Check this circle if you have never been issued a WI Driver License, WI ID or a Social Security Number.</p>										
<b>CURRENT</b>	<p><b>PRINT your NAME exactly as it appears on your identification - WI DL/ID or SSN (as recorded above):</b></p> <table style="width:100%;"> <tr> <td style="width:50%;">Last Name: _____</td> <td style="width:50%;">Middle Name/Initial (if any on ID): _____</td> </tr> <tr> <td>First Name: _____</td> <td>Circle: Jr., Sr., II, III, IV</td> </tr> <tr> <td>Address: _____</td> <td>Apartment/Unit Number: _____</td> </tr> <tr> <td><b>City of Milwaukee, WI</b></td> <td>Zip Code: _____</td> </tr> <tr> <td>Date of Birth (Month/Date/Year) : _____</td> <td>Telephone Number: (    ) _____</td> </tr> </table>	Last Name: _____	Middle Name/Initial (if any on ID): _____	First Name: _____	Circle: Jr., Sr., II, III, IV	Address: _____	Apartment/Unit Number: _____	<b>City of Milwaukee, WI</b>	Zip Code: _____	Date of Birth (Month/Date/Year) : _____	Telephone Number: (    ) _____
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<b>City of Milwaukee, WI</b>	Zip Code: _____										
Date of Birth (Month/Date/Year) : _____	Telephone Number: (    ) _____										
<b>PREVIOUS</b>	<p><b><u>PREVIOUS NAME AND/OR ADDRESS IS REQUIRED:</u></b></p> <table style="width:100%;"> <tr> <td style="width:33%;">Last Name: _____</td> <td style="width:33%;">Middle: _____</td> <td style="width:33%;">First Name: _____</td> </tr> <tr> <td>Address: _____</td> <td colspan="2">Apt./Unit Number: _____</td> </tr> <tr> <td>City: _____</td> <td>State: _____</td> <td>Zip Code: _____</td> </tr> </table>	Last Name: _____	Middle: _____	First Name: _____	Address: _____	Apt./Unit Number: _____		City: _____	State: _____	Zip Code: _____	
Last Name: _____	Middle: _____	First Name: _____									
Address: _____	Apt./Unit Number: _____										
City: _____	State: _____	Zip Code: _____									
<p><b>VOTER SIGNATURE HERE</b> _____ <b>Date (Month/Date/Year)</b> _____</p> <p><b>Falsification of information in this form is punishable under WI law as a Class I felony.</b></p> <p><input type="radio"/> I would like information on serving as a City of Milwaukee election worker.</p>											
<p><b>IF APPLICABLE, TO BE COMPLETED BY SPECIAL REGISTRATION DEPUTY (SRD):</b></p> <table style="width:100%;"> <tr> <td style="width:33%;">SRD Print Name: _____</td> <td style="width:33%;">Signature: _____</td> <td style="width:33%;">ID Number: _____</td> </tr> </table>		SRD Print Name: _____	Signature: _____	ID Number: _____							
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<p><b>OFFICE USE ONLY</b>      District: _____ Ward: _____ NV____ AC____ NC____ DUP____</p> <p>CONF VTR ID# _____ - _____ SVRS ID# _____ Init / Date _____</p>											

Return this completed form to:

**City of Milwaukee Election Commission  
200 E. Wells St., Room 501, Milwaukee, WI 53202  
414-286-3491**

For information on where to vote, go to [www.milwaukee.gov/election](http://www.milwaukee.gov/election)